

#4 ext ①
Docket Number: 5/27/04
PT033079
(2)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

| | | | |
|----------------------------|---|----------|--------------|
| Applicant's Application of | BURGAN, JOHN M. | | |
| Application Number | 09/944,615 | Filed | 8/31/01 |
| For | MESSAGING SYSTEM PROVIDING MESSAGE REDUNDANCY REDUCTION | | |
| Group Art Unit | 2635 | Examiner | AU, SCOTT D. |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.

The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):

| | | |
|-------------------------------------|----------------------------------|------------|
| <input checked="" type="checkbox"/> | One Month (37 CFR 1.17(a)(1)) | \$ 110.00 |
| <input type="checkbox"/> | Two Months (37 CFR 1.17(a)(2)) | \$ 430.00 |
| <input type="checkbox"/> | Three Months (37 CFR 1.17(a)(3)) | \$ 950.00 |
| <input type="checkbox"/> | Four Months (37 CFR 1.17(a)(4)) | \$ 1450.00 |
| <input type="checkbox"/> | Five Months (37 CFR 1.17(a)(5)) | \$ 1970.00 |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to
Deposit Account Number 50-2117

☒ I have enclosed a duplicate copy of this sheet.

I am the:

☐ Applicant/inventor

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

☒ Attorney or agent of record (Registration No.: 46,148)

☐ Attorney or agent under 37 CFR 1.34(a)
Registration number if acting under 37 CFR 1.34(a)

5/17/04

Date



Signature

Randi L. Karpinia

Type or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below.

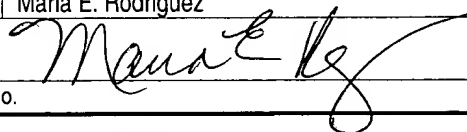
☒ Total of 1 form(s) are submitted

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first-class or express mail in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date listed below:

Name (Print/Type) Maria E. Rodriguez

Signature



Date

5/17/04

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